MERCK FROSST RESEARCH – KEEPING THE PRESSURE UP TO BRING BLOOD PRESSURE DOWN

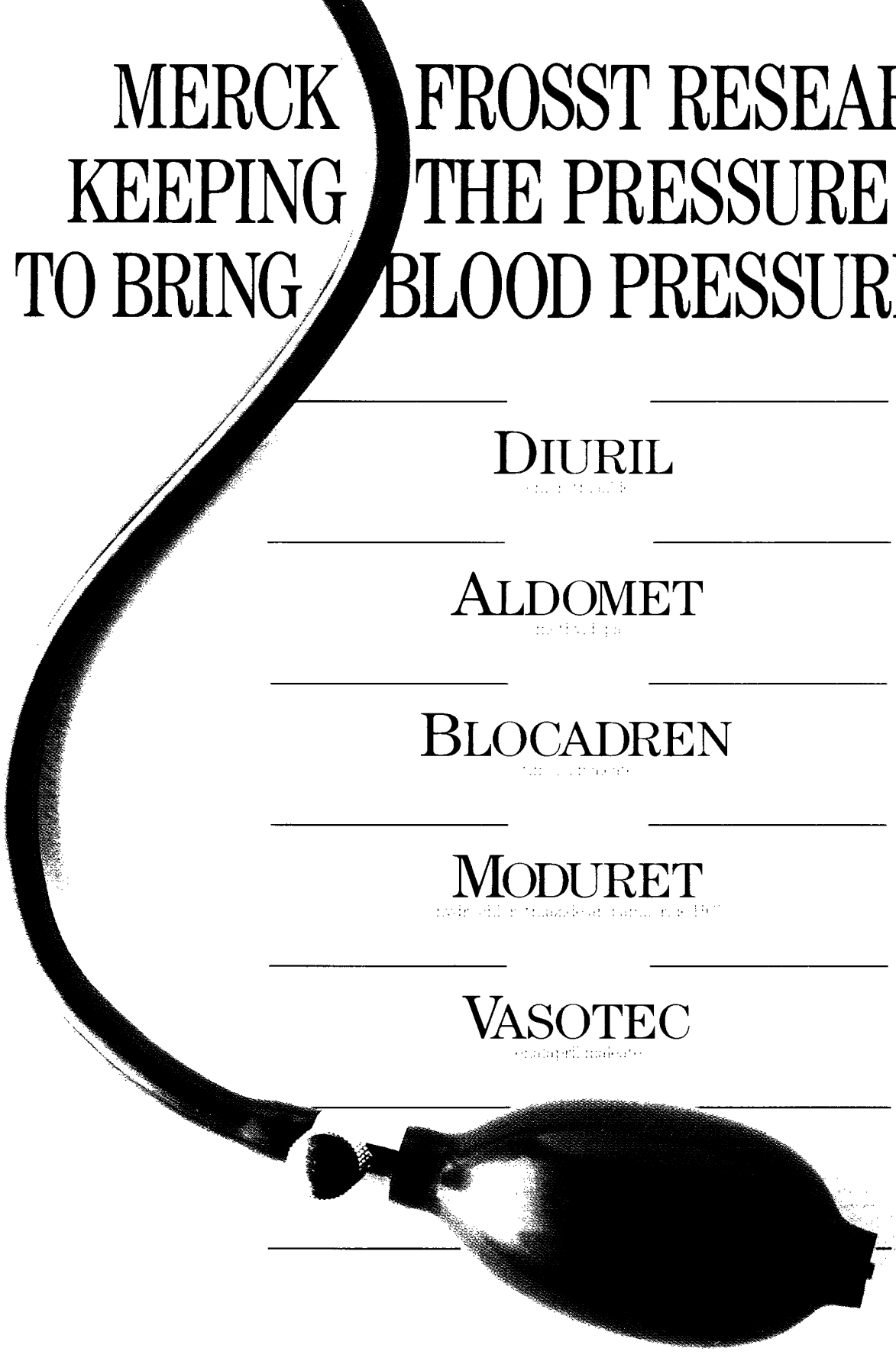
DIURIL

ALDOMET

BLOCADREN

MODURET

VASOTEC



MERCK FROSST CANADA INC.

A leader in antihypertensive therapy

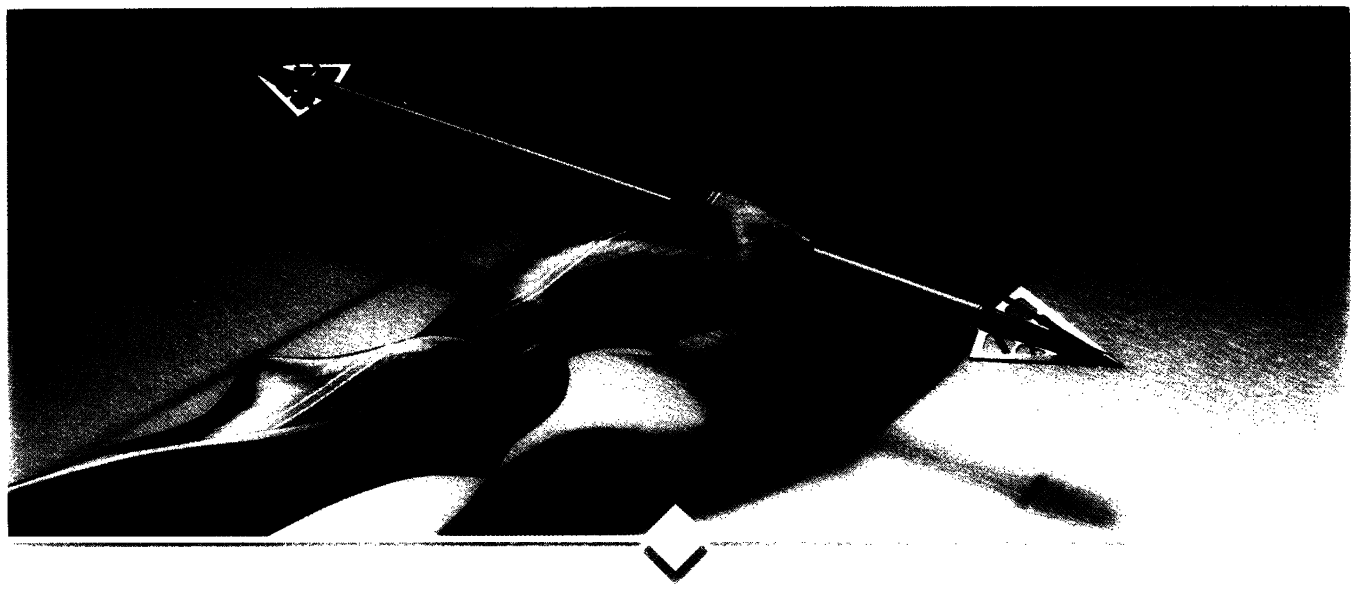
PAAB

LIFT DEPRESSION

WITH FEW SIDE EFFECTS

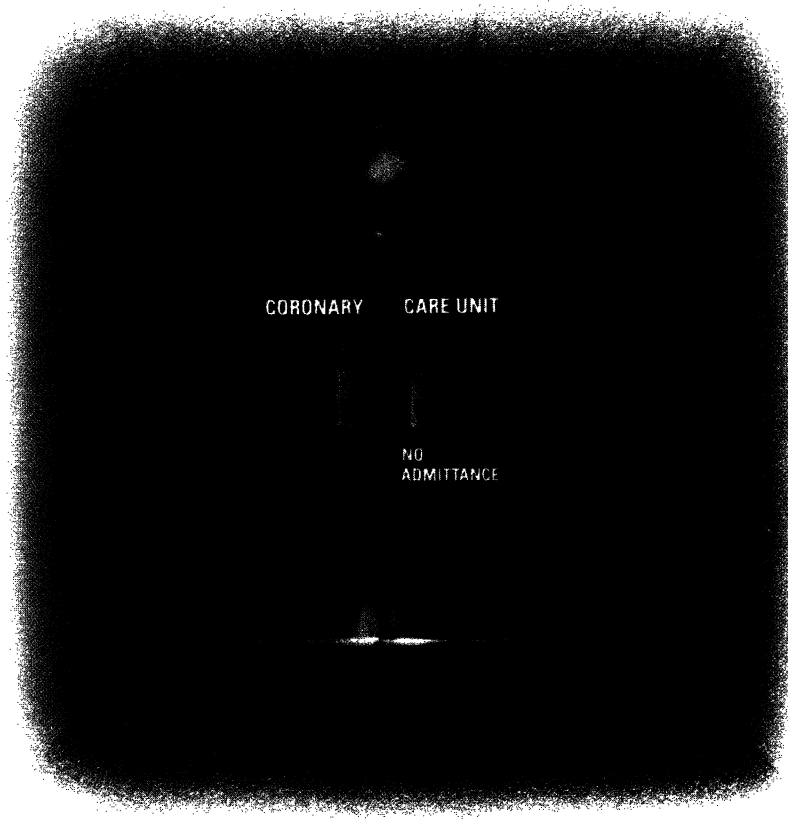
AND BRING THE COLOUR BACK TO LIFE

Your injectable H_2 antagonist shouldn't be too antagonistic.



Zantac® (RANITIDINE HCl)
To be sure

KNOWING THE CONSEQUENCES OF CHF, CONSIDER EARLY INTERVENTION.



How important is early intervention in CHF*?

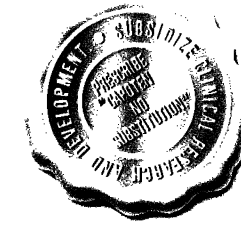
apoten offers [illegible] significant [illegible] tolerance [illegible] NYHA functional [illegible] Capoten offers [illegible] benefits including the reduction of potentially life-threatening [illegible] the correction of [illegible] and the possible attenuation of [illegible]

Given these benefits, can you ever act too soon?

CAPOTEN

captopril

[illegible] innovators [illegible] cardiovascular [illegible]



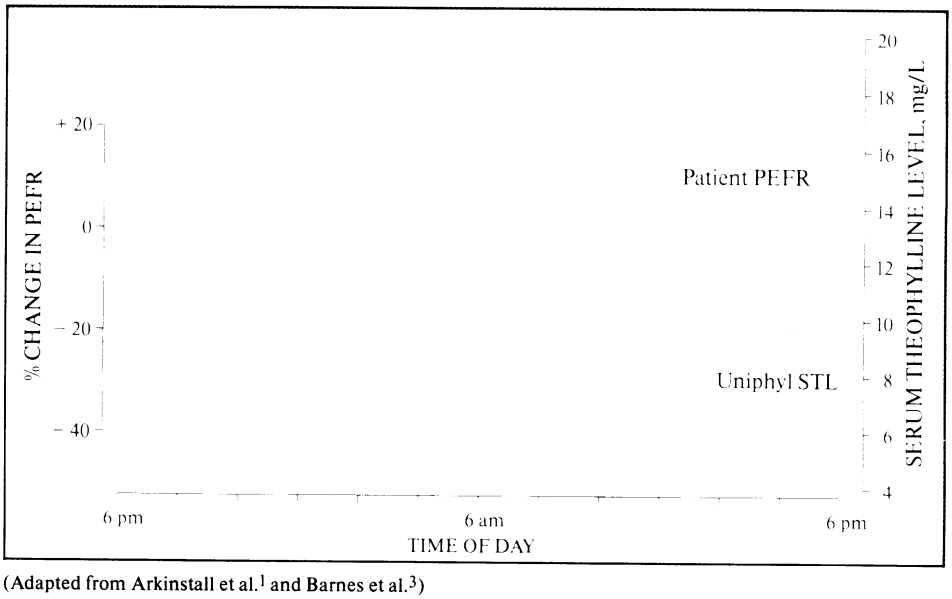
[illegible] respond adequately [illegible] controlled by [illegible]

People used to believe that asthma was best treated with medications that provided flat theophylline levels.

Timing the peak theophylline levels to the time of the patient's greatest need is becoming recognized as providing greater stabilization of the airways than seen with conventional, flat serum theophylline levels.

Uniphyl administered in the evening, provides maximum theophylline levels in the early morning hours, and more effective asthma control for a full 24 hours.[1]

Clinical trials showed that with Uniphyl the patients' FEV_1 measurements were better in the morning, and significantly more stable throughout the day, than with a twice-daily theophylline preparation.[1,2]

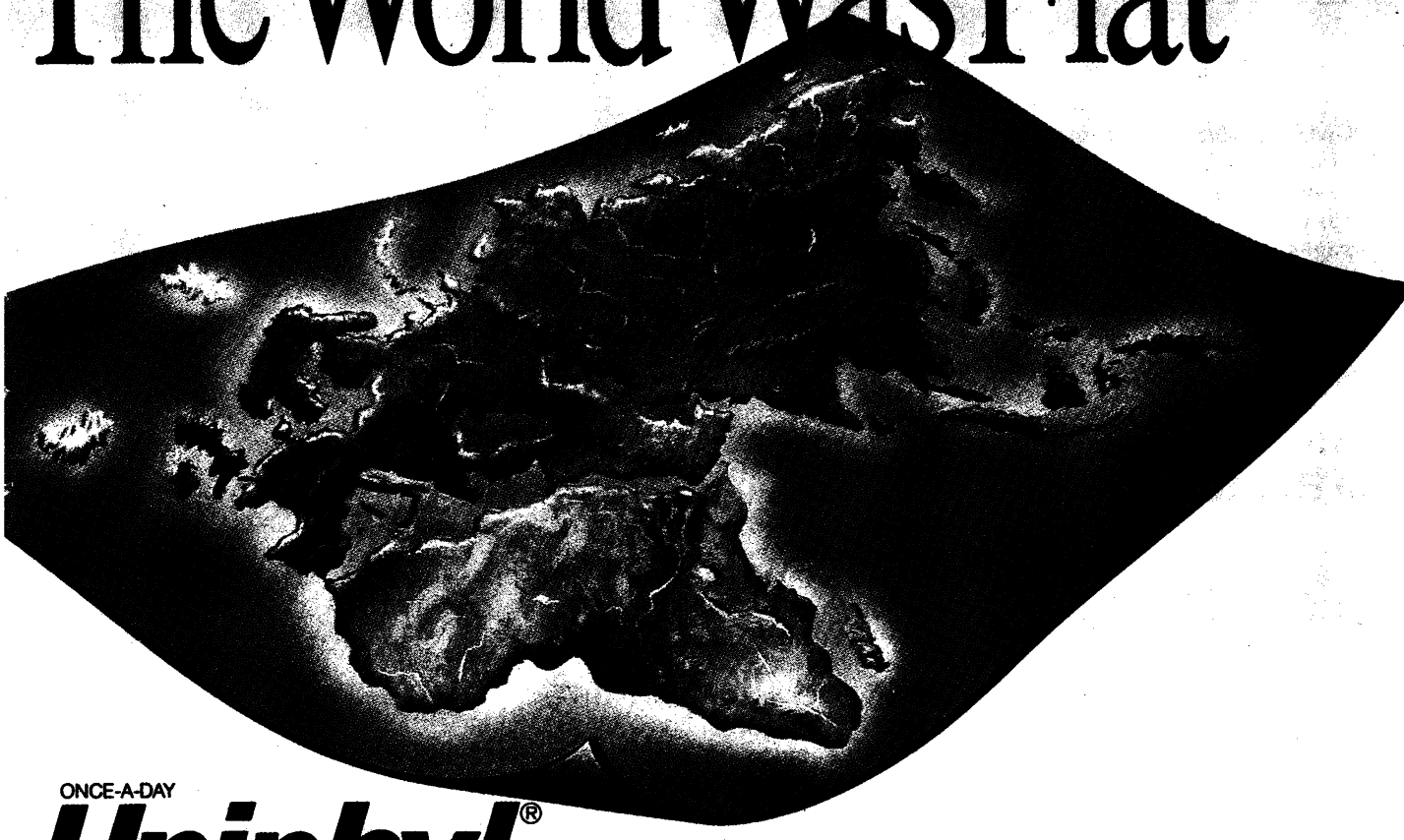


(Adapted from Arkinstall et al.[1] and Barnes et al.[3])

Asthma patients have reduced airflow at night and in the early morning;[3] Uniphyl can provide greater serum theophylline levels at this time.[1]

Most patients should take once daily Uniphyl with, or shortly following, the evening meal.

The World Was Flat



ONCE-A-DAY

Uniphyl®

Theophylline sustained release tablets

More effective control 24 hours a day.[1,2]

Studies comparing Uniphyl administered in the evening to a conventional 12-hour, sustained-release theophylline, showed that:

- Uniphyl produced greater stabilization of airway function.[1]
- Uniphyl improved spirometry and symptoms.[1,2,4]
- There was a smooth transition from the twice-daily theophylline preparation.[4]

Patients preferred Uniphyl's 24 hour control.[1,2,4]

- When 197 asthmatics were transferred to Uniphyl, from twice-daily theophylline preparations, 155 (78.7%) said they would prefer to continue taking Uniphyl.[5]

Round out your asthma therapy with Uniphyl. More effective control 24 hours a day.

® owned by PMAC

Purdue Frederick Inc.
Toronto, Canada M4A 1A9

PAAB CCPP

For prescribing information see page 336

CHOLESTEROL CONTROL

THE MOST COMMON SIDE EFFECT FROM TAKING QUESTRAN* CAN BE FOUND ON PAGE 296

An anti-arthritic with more

than strength on its side.

Ansaid

Well-Tolerated Strength.

Highly effective, with a minimum of adverse reactions.[1,2,3,4]

That's what Ansaid can offer your arthritic patient.

Even at maximum dosage, Ansaid exhibits few adverse effects.[4,5,6]

And its elimination appears to remain unaltered by age.[7,8]

In fact, the elderly appeared to tolerate Ansaid as well as younger patients, in a five year study of 1220 patients.[8]

Ansaid

Rapid Strength.

Ansaid's tolerability however, doesn't compromise its strength.

Ansaid has a rapid onset of action for fast, effective relief of arthritic pain.[9,10]

Providing efficacy equal to indomethacin, naproxen and diclofenac.[1-5,11]

So when you need to get tough with arthritis, without being tough on your patient, consider Ansaid.

Ansaid® 50 mg 100 mg Tablets

(flurbiprofen)

More Than Strength.

8801 REGISTERED TRADEMARK ANSAID C E970

PMAC

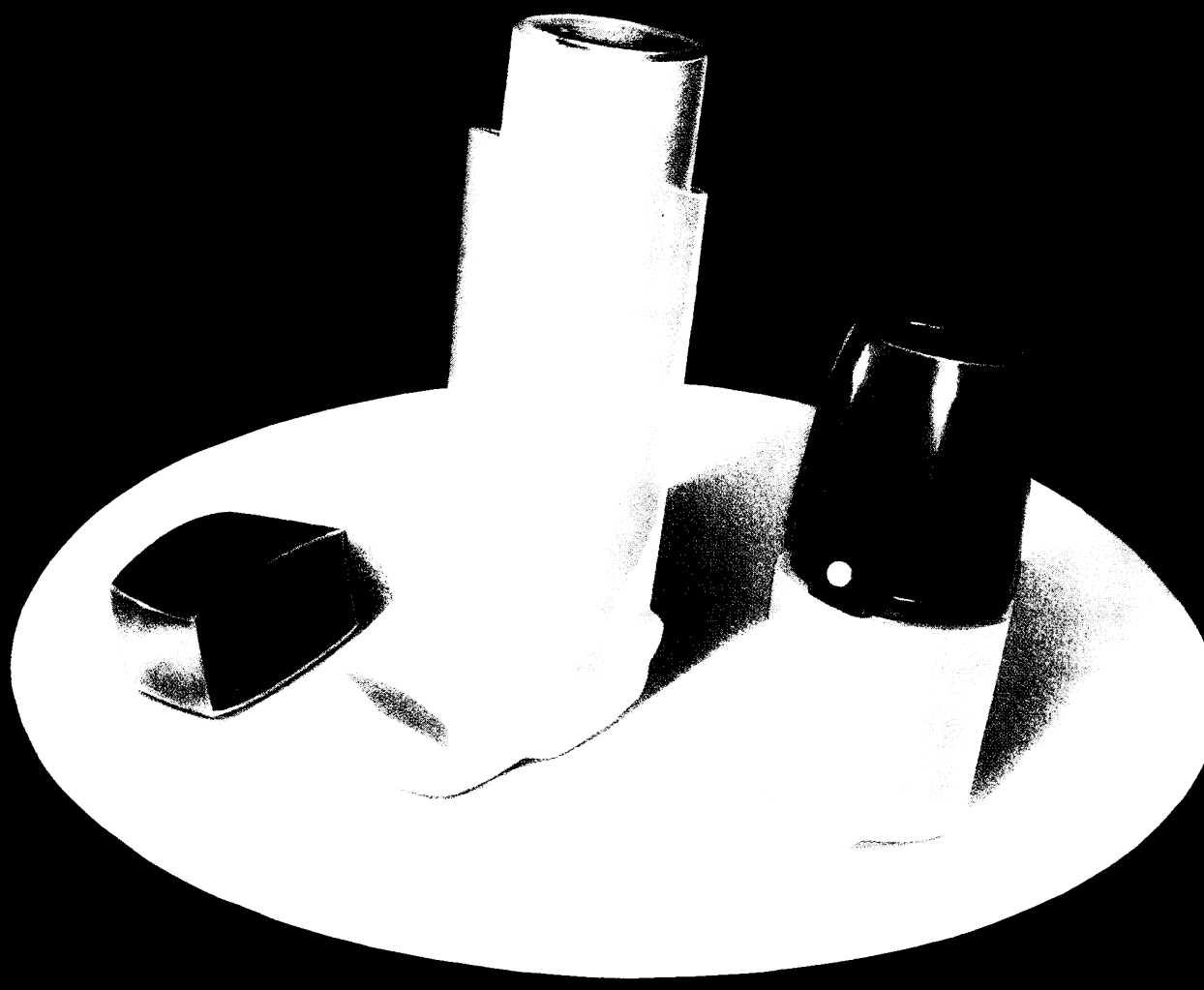
Upjohn

THE UPJOHN COMPANY OF CANADA
865 YORK MILLS ROAD/DON MILLS ONTARIO

PAAB CCPP

For prescribing information see page 332

What's the difference between Ventolin® Inhaler and Ventolin Rotacaps®?



If you are disturbed by this ad, imagine how the incontinent feel.

For the incontinent person, indignity and embarrassment is a daily occurrence. Of the estimated one million Canadians who suffer from it, only one in twelve seeks help. The incidence of incontinence increases each year as the population ages.[1,2]

Ditropan helps

Ditropan helps, because it is specifically indicated for relief of symptoms associated with reflex and uninhibited neurogenic bladder, the most common form of neurogenic bladder seen in clinical practice.[3,4,5,6,7]

Ditropan is unique

The unique dual action (neurotropic and musculotropic) of Ditropan produces the four bladder responses most desired when treating the neurogenic bladder:

- increased bladder capacity
- diminished frequency of bladder contraction
- delayed initial desire to void
- local anesthetic/analgesic effect[4]

Ditropan can be used effectively to treat enuresis as well as incontinence, due to reflex or uninhibited neurogenic bladder, in all age groups over five years of age.[8]

Helping You Help

Norwich Eaton

Norwich Eaton Pharmaceuticals Inc.
A Procter & Gamble Company
Kitchener, Ontario N2R 5V6

NORWICH EATON UROLOGICALS

constipation.

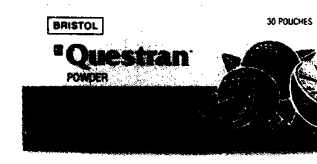
After 20 years of clinical use, it's reassuring to know that the most common adverse reaction to non-systemic Questran* (cholestyramine resin) is mild constipation.

In the majority of cases, this is transient and easily treated with fruit, fibre and fluids.

Knowing what to expect is one of the reasons why the U.S. National Heart, Lung and Blood Institute named Questran* as a drug of first choice in the treatment of elevated cholesterol.[1]

Because of its non-systemic action, there are virtually no pharmacologic effects on vital body organs such as liver, eyes and muscles.

Which means generally well tolerated, effective treatment when long-term patient therapy is needed.



Questran

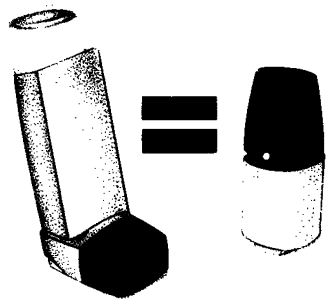
YOUR FIRST COURSE AFTER DIET.

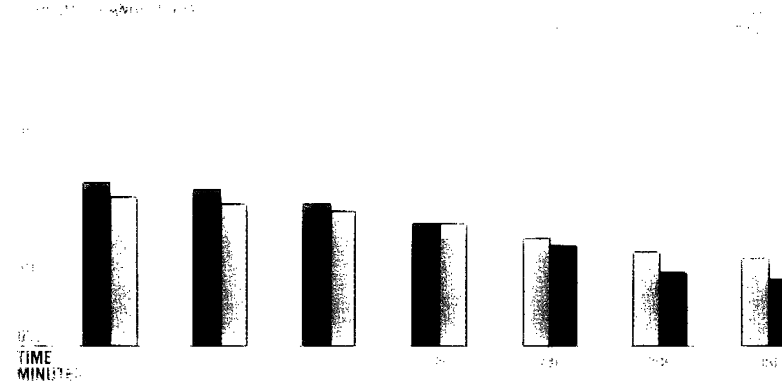
1. National Cholesterol Education Program, coordinated by the National Heart, Lung and Blood Institute, NIH publication No. 88-2926, November 1987.
*TM Authorized User For prescribing information, see page 329.

The pres

Which form of Ventolin your patient receives depends on your judgement of which form works best for that individual

Ventolin Inhaler

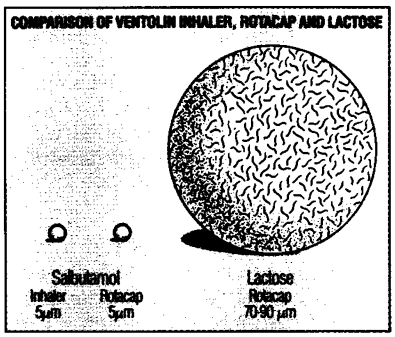




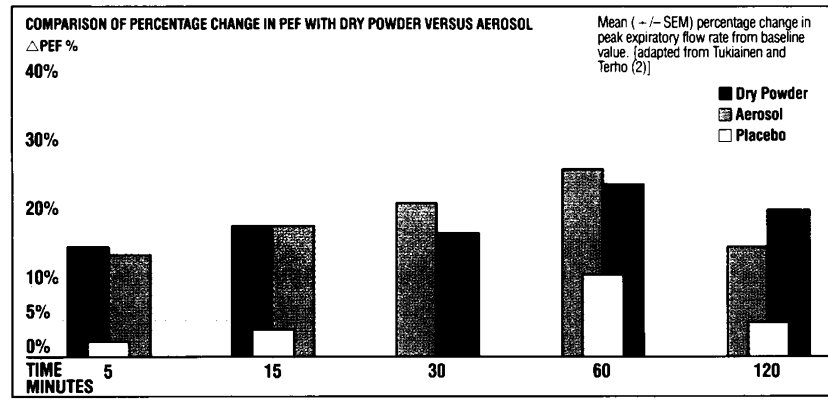
criptions.

℞ *Ventolin Rotahaler & Rotacaps*

Because Ventolin is Ventolin.



Light, small Ventolin particles are carried deep into the lungs. Heavier lactose particles in Rotacaps are deposited largely in the mouth and pharynx[5]



Patients with low inspiratory flow can use a Rotahaler® successfully because of its low resistance to airflow.

Ventolin Rotacaps and Rotahaler are as effective as Ventolin Inhaler, without depending on hand-breath coordination, reducing your concern of lowered efficacy due to poor inhaler technique.

PAAB
Product Monograph available upon request.

Glaxo
Glaxo Canada Inc.

For prescribing information see page 335

FOR HYPERTENSIVE PATIENTS UNABLE TO TOLERATE BETA-BLOCKER THERAPY

The "EARLY MORNING BLAHS" †

When adverse effects of beta blockade affect performance[1]...

N.B. The incidence of specific adverse effects among beta blockers may vary.

† Certain CNS effects such as depression, insomnia and nightmares sometimes associated with beta blockers.

1. Kaplan, N.M.: Systemic Hypertension Therapy *in* Heart Disease: A Textbook of Cardiovascular Medicine, ed. E. Braunwald, Philadelphia, W.B. Saunders Company, 3rd ed., Vol.1, pp 874-875, 1988.

IT MAY CHANGE THE WAY YOUR PATIENTS FEEL ON ANTIHYPERTENSIVE THERAPY

VASOTEC® (enalapril maleate) is contraindicated in patients who are hypersensitive to this product.

Angioedema has been reported in patients treated with VASOTEC® (enalapril maleate). Angioedema associated with laryngeal edema and/or shock may be fatal. If angioedema occurs, VASOTEC® should be promptly discontinued and the patient should be observed until the swelling subsides. Where swelling is confined to the face, lips and mouth the condition will usually resolve without further treatment, although antihistamines may be useful in relieving symptoms. These patients should be followed carefully until the swelling has resolved. However, where there is involvement of the tongue, glottis or larynx, likely to cause airway obstruction, subcutaneous adrenaline (0.5 mL 1:1000) should be administered promptly when indicated.

Symptomatic hypotension has occurred after administration of VASOTEC®, usually after the first or second dose or when the dose was increased. It is more likely to occur in patients who are volume depleted by diuretic therapy, dietary salt restriction, dialysis, diarrhea, or vomiting. In patients with severe congestive heart failure, with or without associated renal insufficiency, excessive hypotension has been observed and may be associated with oliguria and/or progressive azotemia, and rarely with acute renal failure and/or death. Because of the potential fall in blood pressure in these patients, therapy should be started under very close medical supervision, usually in a hospital. Such patients should be followed closely for the first two weeks of treatment and whenever the dose of enalapril and/or diuretic is increased.

Discontinue therapy with a beta blocker only in accordance with the recommendations in the prescribing information for that product.

PAAB

FOR PRESCRIBING INFORMATION PLEASE SEE FOLLOWING PAGES.

RNT-(88)-89-CDN-1376-JA-F

Frosst

Therapeutic Index

Allergic rhinitis therapy
Beconase **278, 335**

Angiotensin converting enzyme inhibitor
Vasotec **311, 312, 330, 331, 332**

Anticholinergic
Ditropan **277, 337**

Antidepressant
Ludiomil **328, Outside Back Cover**
Norpramin **254, 338**

Antihypertensive agent
Capoten **258, 334, 335**
Trandate **333, Inside Back Cover**

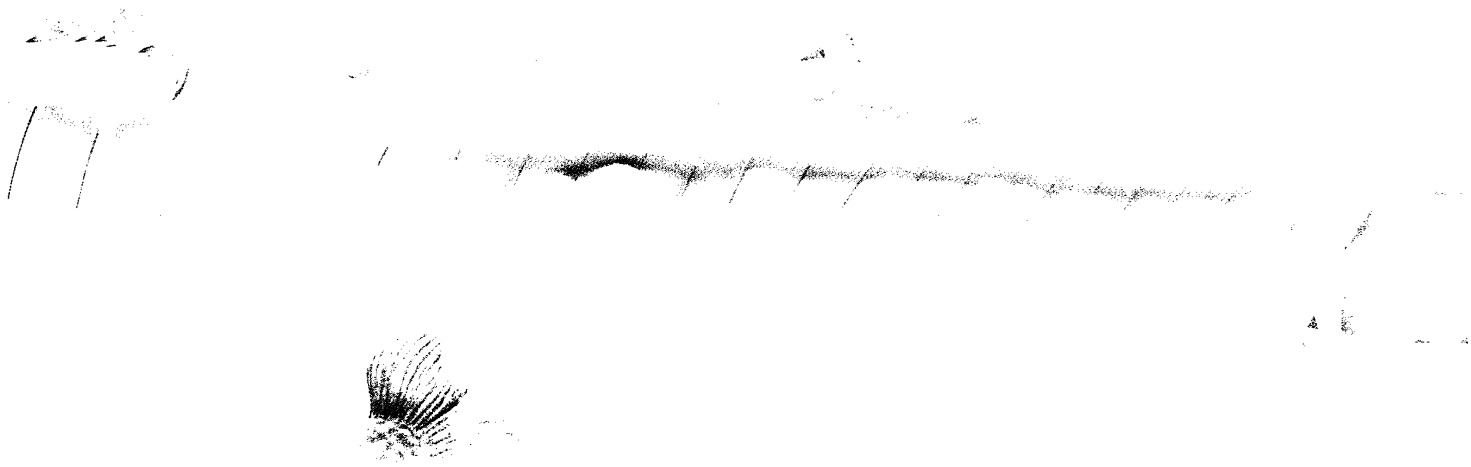
Anti-inflammatory agent
Ansaid **268, 269, 332**

Bronchodilator
Uniphyl **260, 261, 336, 337**
Ventolin **272, 306, 307, 335**

Diarrheal preparation
Questran **266, 296, 329**

Histamine H_1 receptor antagonist
Seldane **263, 265, 337**

Histamine H_2 receptor antagonist
Zantac **256, 301**



Living With Hypertension

Trandate (labetalol HCl) can help a wide spectrum of patients live with their condition.
Trandate is a unique single entity antihypertensive. Not only will it spare the heart by blocking beta receptors, it also reduces peripheral vascular resistance through *vasodilation.*[1]
Prescribe Trandate for effective control of hypertension. Trandate has no significant effect on cardiac output even during exercise[2,3] and a relatively low incidence of side effects.

Glaxo Canada Inc.

TRANDATE®
labetalol HCl

Welcome Back Coach!

For prescribing information see page 328